



State of New Hampshire

2014 ANNUAL REPORT

The following information shall be given as of January 1
preceding the due date Pursuant to RSA 293-A:16.22.

REPORT DUE BY April 1, 2014

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE

WILL BE ASSESSED A LATE FEE.

Filed
Date Filed: 02/21/2014
Business ID: 229746
William M. Gardner
Secretary of State

STEPPING STONE LODGE RETREAT & CONFERENCE CENTER, INC.

372 Webster Highway

Temple, NH 03084

ENTITY TYPE: CORPORATION

BUSINESS ID: 229746

STATE OF DOMICILE: NEW HAMPSHIRE

OWN OPERATE & DEAL IN A LODGING& ALL SVCS

ADDRESS OF PRINCIPAL OFFICE:

818 PUTNAM ROAD

TEMPLE, NH 03084

REGISTERED AGENT AND OFFICE:

Callahan, James M, Esq

Atkins Callahan 20 Depot Street S220

Peterborough, NH 03458

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.

☒ The new mailing address

☒ The new principal office address

305 Webster Hwy. Temple, NH 03084

PO Box is acceptable.

OFFICERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

(MUST LIST AT LEAST ONE OFFICER BELOW)

NAME Isabella Martin
STREET 305 Webster Hwy
CITY/STATE/ZIP Temple, NH 03084
NAME _____
STREET _____
CITY/STATE/ZIP _____
NAME _____
STREET _____
CITY/STATE/ZIP _____
NAME _____
STREET _____
CITY/STATE/ZIP _____

NAMES AND ADDRESSES OF ADDITIONAL OFFICERS AND DIRECTORS ARE ATTACHED

BOARD OF DIRECTORS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

(MUST LIST AT LEAST ONE DIRECTOR BELOW)

NAME Isabella Martin
STREET 305 Webster Hwy
CITY/STATE/ZIP Temple, NH 03084
NAME _____
STREET _____
CITY/STATE/ZIP _____
NAME _____
STREET _____
CITY/STATE/ZIP _____
NAME _____
STREET _____
CITY/STATE/ZIP _____

To be signed by an officer, director, or any other person authorized by the board of directors.
I, the undersigned, do hereby certify that the statements on this report are true to the best of my information, knowledge and belief.

Sign here:

Please print name and title of signer:

NAME

TITLE

FEE DUE: \$100.00

E-MAIL ADDRESS (OPTIONAL):

State of New Hampshire
Fee - Form 47 - (Corporations) 1 Page(s)



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PUBLIC DOCUMENT A
REQUIRED INFORMATION

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DISCLOSURE
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